

Agency Overview and Budget Summary

Presentation to Senate Ways & Means Subcommittee on Human Services

Budget Overview Overview of Mental Health Hospitals

Laura Howard, Secretary

Scott Brunner, Deputy Secretary of Hospitals and Facilities

State Mental Health Hospitals

Osawatomie State Hospital (OSH), Adair Acute Care (AAC) and Larned State Hospital (LSH) serve people experiencing serious symptoms of mental illness.

- Persons who have been deemed a danger to themselves or others:
 - Generally, exhibit symptoms that community providers cannot treat safely and effectively.
 - Once stabilized, can return home and be supported by their local Community Mental Health Center (CMHC).
- AAC and LSH's Psychiatric Services Program (PSP) are certified to participate in Medicaid and Medicare and receive federal funding.
- The Hospitals are required to provide an array of mental health care and treatment for all their patients from their approved budget.

State Mental Health Hospitals

LSH has two programs In addition to Psychiatric Services Program (PSP):

- Sexual Predator Treatment Program (SPTP)
 - Serving residents civilly committed as sexually violent predators who receive treatment and services.
- State Security Program (SSP)
 - Serving individuals referred by the district courts for forensic evaluation and/or treatment and a minimal number of females transferred from the Department of Corrections pursuant to the Kansas Code of Criminal Procedure as well as housing the Security Behavioral Unit, which serves highly aggressive patients transferred from PSP and OSH.

State Mental Health Hospitals

Summary of State Mental Health Hospital Census

(as of 1/1/2022)

<u>Facility</u>	<u>Budgeted Beds</u>	<u>Average Census FYTD*</u>
Osawatomie State Hospital OSH	114	97
Adair Acute Care AAC	60	32
LSH – Psychiatric Services Program (PSP)	90	69
LSH – State Security Program (SSP)	140	88
LSH – Sexual Predator Treatment Program (SPTP)	274	245
LSH – SPTP Reintegration (Meyer East)	16	9
TOTAL	694	540

Summary of Staffing

<u>Facility</u>	<u>Authorized Positions**</u>
OSH	319.30
AAC	178.50
LSH	909.50
TOTAL	1,407.3

**Fiscal Year to Date*

***Includes FTE and Non-FTE*

State Mental Health Hospitals

Summary of State Mental Health Hospital Turnover and Vacancy Rates (as of 1/1/2022)

<u>Facility</u>	<u>Turnover Rate (%)</u>	<u>Vacancy Rate (%)</u>
OSH	26.8	37.2
LSH - Overall	23.8	41.6

Budget

Key Points Regarding State Hospital Funding:

- Funding for State Hospitals comes from three main sources:
 - State General Fund
 - Medicaid/Disproportionate Share (DSH) Payments
 - Medicare/Private Insurance
- All hospital Medicaid and DSH Payments are deposited into a “parent” Title XIX account at KDADS:
 - KNI and PSH bring in most of the Medicaid revenue
 - AAC and LSH bring in the majority of the DSH revenue
 - Funding is distributed throughout the year through transfers from KDADS to the Hospitals

Budget

Larned State Hospital

FY 2021 Actuals:

- Actual expenditures total \$76.9 million, including \$64.4 million from SGF

FY 2022 Budget :

- Recommended budget totals \$72.5 million, including \$61.0 million from SGF

FY 2023 Budget:

- Recommended budget totals \$71.9 million, including \$62.4 million from SGF

Budget

Osawatomie State Hospital

FY 2021 Actuals:

- Actual expenditures total \$46.0 million, including \$37.4 million from SGF

FY 2022 Budget:

- Recommended budget totals \$47.6 million, including \$34.8 million from SGF

FY 2023 Budget:

- Recommended budget totals \$52.9 million, including \$40.9 million from SGF

Overview of State Hospitals

Enhancements in the Governor's Budget Recommendation

Direct Care Salary Increase: For FY 2023, the Governor recommends an enhancement of \$5.8 million from the State General Fund for salary increases for direct care staff related to Executive Directive 21-537 and 21-538 which were approved and self-funded in FY 2022.

Impact of Direct Care Salary Increase	FY 2023
Kansas Neurological Institute	2,700,659
Larned State Hospital	349,922
Parsons State Hospital	2,773,383
Osawatomie State Hospital	1,147,174
	\$ 6,971,138

5% State Employee Pay Raise: For FY 2023, the Governor recommends a 5.0% pay increase for all state employees.

Both items should help address recruitment and retention of staff at the state hospitals.

Overview of State Hospitals

Enhancements in the Governor's Budget Recommendation

24/7 Pay Plan: The 24/7 state facilities pay plan has already gone into effect for the remainder of FY 2022 with funding from SPARK Committee with approval from the State Finance Council.

KDADS received \$9.6 million from the SPARK Committee for the FY 2022 costs of these increases.

To continue for FY 2023, the Governor recommends:

- \$2.4 million to continue the base pay increase
- \$15.6 million to continue temporary pay differentials for staff at the state hospitals

These funds are included in the Governor's Recommended FY 2023 budget for KDADS.

The pay plan includes the following for state employees:

- Permanent Base Pay Increases for all KDOC Job Classes & Nursing Job Classes
- Temporary Pay Differentials for Hourly Employees in the following areas:
 - Differential #1: All 24/7 Facility Staff
 - Differential #2: Uniformed KDOC Security Staff at 24/7 Facilities
 - Differential #3: Nursing Staff at 24/7 Facilities
 - Differential #4: All Staff Working at 24/7 Facilities that are designated at "critical staffing levels" with 25% (or higher) vacancy rates.

State of Kansas: 24/7 Facility Staff Pay Plan

(Hourly and Salaried Employees)

<u>Differential Four</u> 24/7 Facilities Designated as “Critical Staffing Levels”	Temporary <i>(as designated)</i>	\$2.50 per Hour for all 24/7 Facility Staff with 25% Vacancy Level (or Higher) Employees Impacted: 2,381*	<u>Cost (FY22)</u> \$6.53M*	<u>Cost (FY23)</u> \$11.49M*
<u>Differential Three</u> All 24/7 Facility Nursing Staff	Temporary	\$4.50 per Hour for all 24/7 Nursing Staff Employees Impacted: 349*	<u>Cost (FY22)</u> \$2.23M*	<u>Cost (FY23)</u> \$3.87M*
<u>Differential Two</u> All KDOC Uniformed Security Staff	Temporary	\$2.00 per Hour for all KDOC Uniformed Security Staff & Security Staff at LSH Employees Impacted: 1,933*	<u>Cost (FY22)</u> \$5.88M*	<u>Cost (FY23)</u> \$10.19M*
<u>Differential One</u> All 24/7 Facility Staff	Temporary	\$1.50 per Hour for all 24/7 Facility Staff Employees Impacted: 4,138*	<u>Cost (FY22)</u> \$9.88M*	<u>Cost (FY23)</u> \$17.12M*
Base Pay Increase	Permanent	Base Pay Increases for <u>ALL</u> KDOC-specific Job Classes and 24/7 Nursing Staff Employees Impacted: 2,407*	<u>Cost (FY22)</u> \$6.53M*	<u>Cost (FY23)</u> \$11.49M*
Bonuses	One-Time	\$3,500 Bonuses for <u>ALL</u> Salaried Employees at 24/7 Facilities Employees Impacted: 331*	<u>Cost (FY22)</u> \$1.62M*	<u>Cost (FY23)</u> N/A

*Estimate

Overview of State Hospitals

Enhancements in the Governor's Budget Recommendation

Regional Capacity: \$15.0 million SGF enhancement in FY 2023 to contract and build capacity of 50 new regional beds, including \$10.0 million in start-up and construction support and \$5.0 million in ongoing costs.

- This was recommended by the 2021 Special Committee on Mental Health Modernization & Reform.
- Adding 25 new regional involuntary beds, and 25 forensic beds for competency needs.
- Unlike KDADS' state institution alternative contracts with existing hospitals, this will add new beds in a regional model.

Mobile Competency: \$2.8 million enhancement from SGF in FY 2023 to expand KDADS' provider pool providing mobile competency (and restoration services).

- This will include community mental health centers to reduce the competency evaluation and restoration backlog.
- This was recommended by the 2021 Special Committee on Mental Health Modernization & Reform to reduce the strain on law enforcement agencies, jails and hospital emergency rooms.
- KDADS has introduced legislation to support the effort for community-based evaluation and restoration.

Overview of State Hospitals

Enhancements in the Governor's Budget Recommendation

Capital Improvements: \$8.1 million from the State Institutions Building Fund in the KDADS budget for capital improvement projects at the four state hospitals.

- This includes funding for first and second priority rehabilitation and repair projects across the campuses
- Includes funding to begin the razing projects with two abandoned buildings at Osawatomie State Hospital and one at Parsons State Hospital in FY 2023.

Larned State Hospital

**Laura Howard Secretary,
Kansas Department for Aging and Disability Services**

House Social Services Budget Committee

Larned State Hospital

February 9, 2022

Lesia Dipman, LMSW, Superintendent

Larned State Hospital

Larned State Hospital operates 3 distinctly different treatment programs:

- Psychiatric Services Program (PSP)
- State Security Program (SSP)
- Sexual Predator Treatment Program (SPTP)

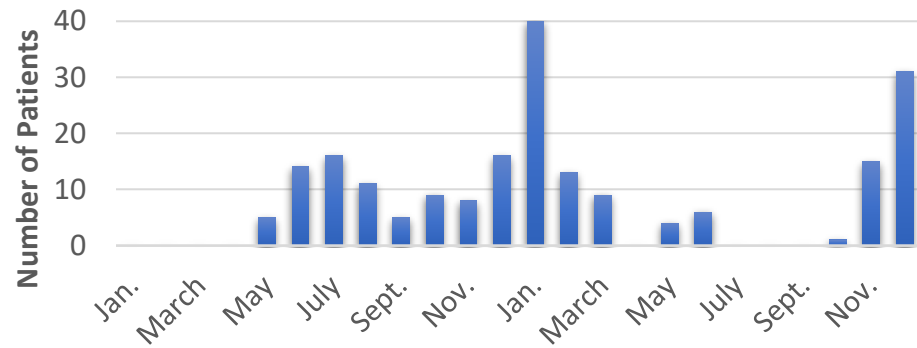
Larned State Hospital

Psychiatric Services Program (PSP):

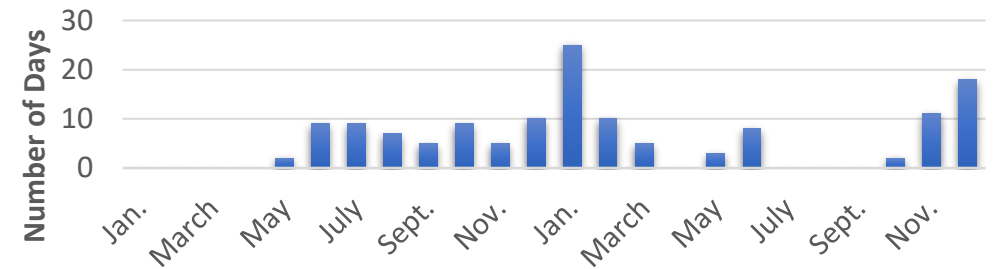
- Serves voluntary as well as civilly committed adults with mental illness and is budgeted for 90 beds.
- Patients who enter the program are required to be screened by a qualified mental health professional from one of the community mental health centers in Central and Western Kansas or be referred under an order of evaluation or treatment from a judge.
- PSP admitted 827 patients and discharged 814. To provide for single room occupancy during the COVID-19 pandemic, census was reduced from 90 to 72, resulting in implementation of a managed moratorium. In January 2022, due to ongoing staffing shortages and efforts to maintain patient and staff safety, PSP had to reduce census to 62 patients and is monitoring admissions daily.
- **A wait list was necessary 82 of 365 days with approximately 12 pending admissions waiting per month for an average wait time of 31 hours.**

Larned State Hospital

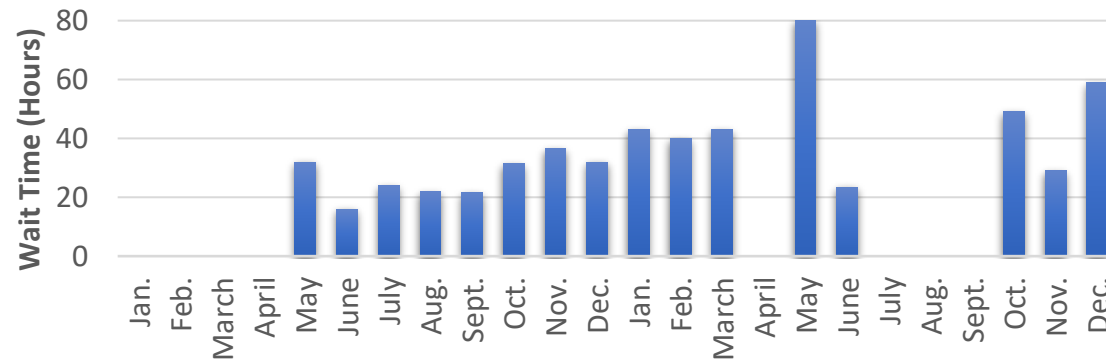
**PSP Monthly Patient Wait List Numbers
January 2020 - December 2021**



**PSP Total Number of Days the Wait List
Occurred During the Month
Jan. 2020 - Dec. 2021**

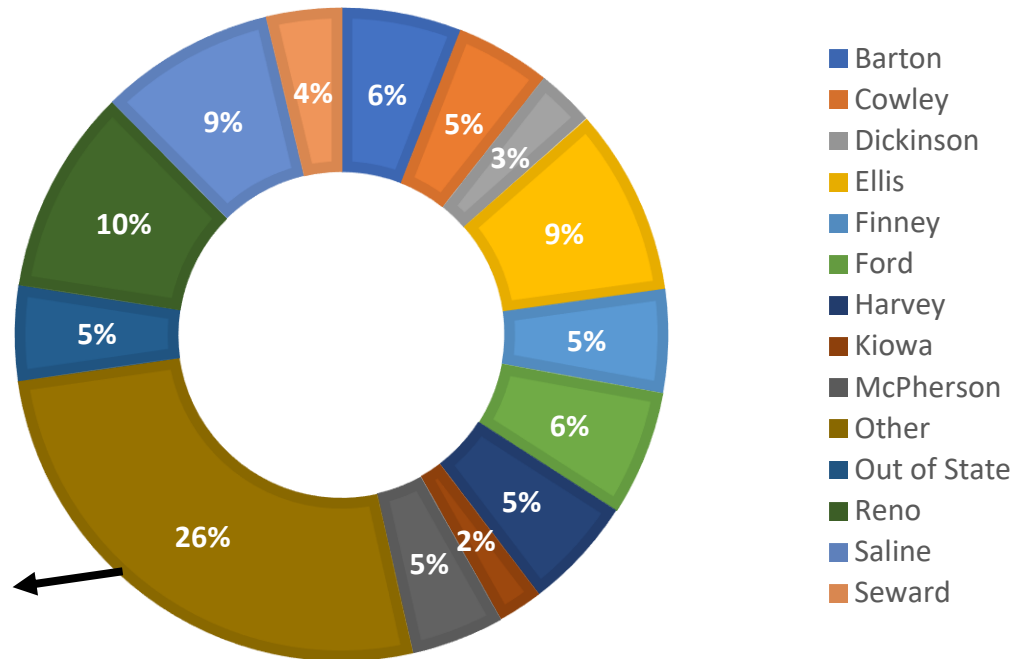


**PSP Average Wait Time for a Bed per Month
January 2020 - December 2021**



Larned State Hospital

**PSP ADMISSIONS BY COUNTY
JANUARY – DECEMBER, 2021**



Admissions Jan-Dec 2021

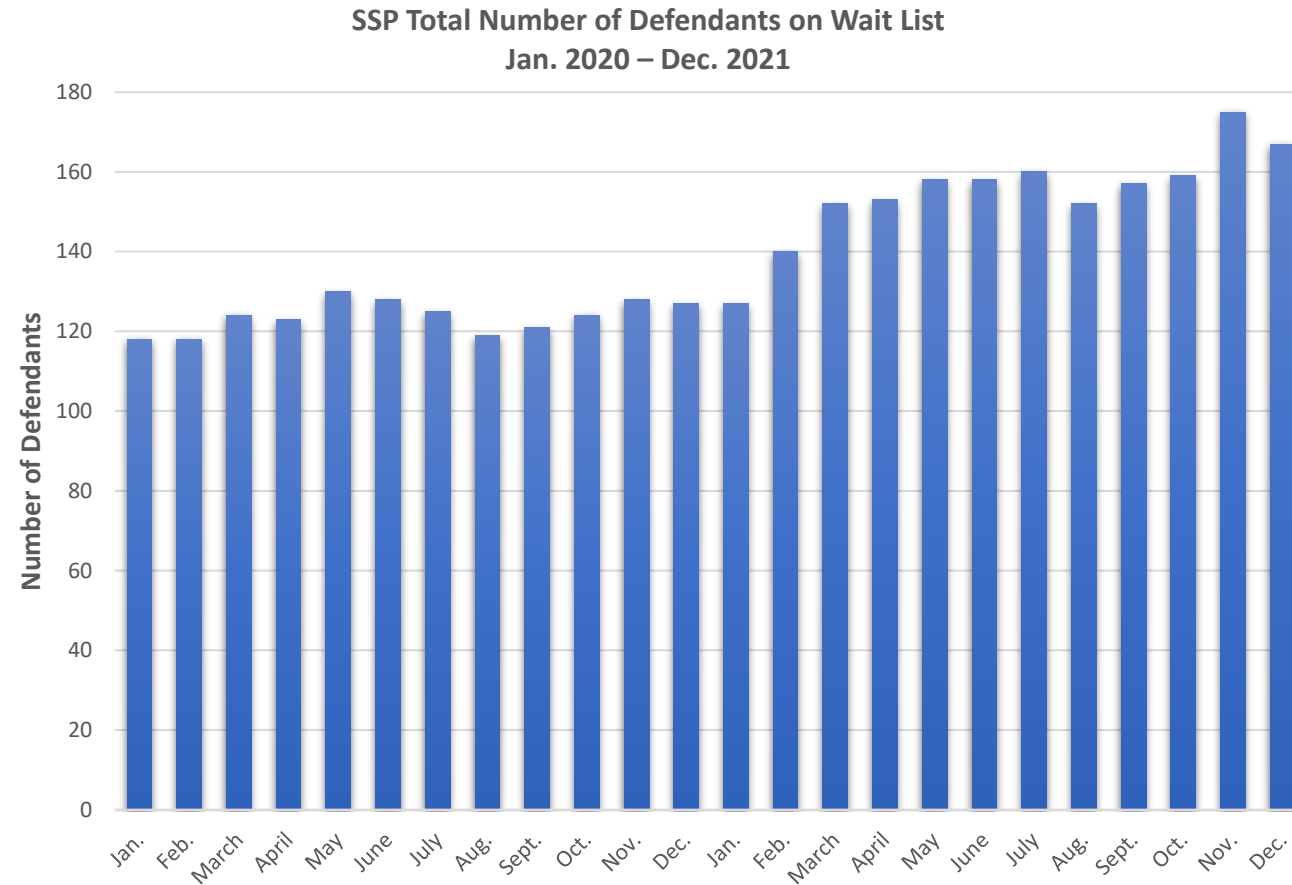
Barton	48
Cowley	38
Dickinson	23
Ellis	75
Finney	41
Ford	50
Harvey	45
Kiowa	18
McPherson	37
Other	212
Out of State	38
Reno	82
Saline	70
Seward	30

Larned State Hospital

State Security Program (SSP):

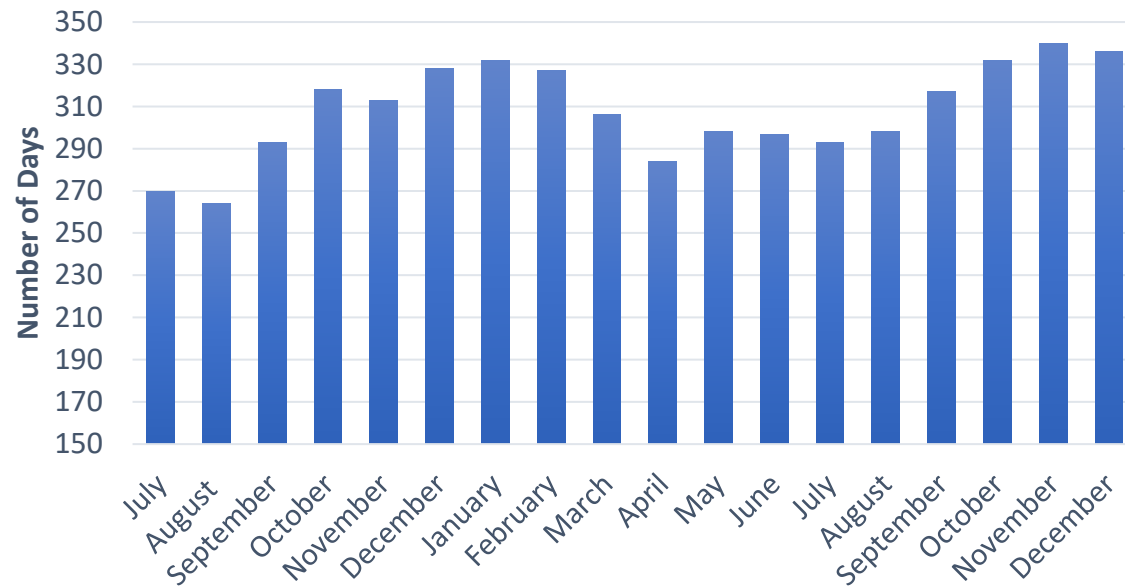
- Known as the State Security Hospital in statute, SSP is budgeted for 140 beds with a current capacity of 100 adult male and female patients charged with felony crimes. The reduction in capacity is a result of staffing shortages and the need for COVID isolation areas.
- The District Courts refer individuals pursuant to the Kansas Code of Criminal Procedure for various criminal evaluations, competency restoration, treatment in lieu of confinement, or lack of mental state, in addition to a small number of females transferred from the Kansas Department of Corrections (KDOC).
- SSP includes the Security Behavior Unit (20 beds). This unit serves male patients administratively transferred from OSH or PSP who cannot be managed in a less restrictive environment, come from jail on a hold order with a high-level crime, and/or are a threat of harm toward patients and/or staff. Once their behavior is stabilized, they are transferred back to OSH or PSP.

Larned State Hospital

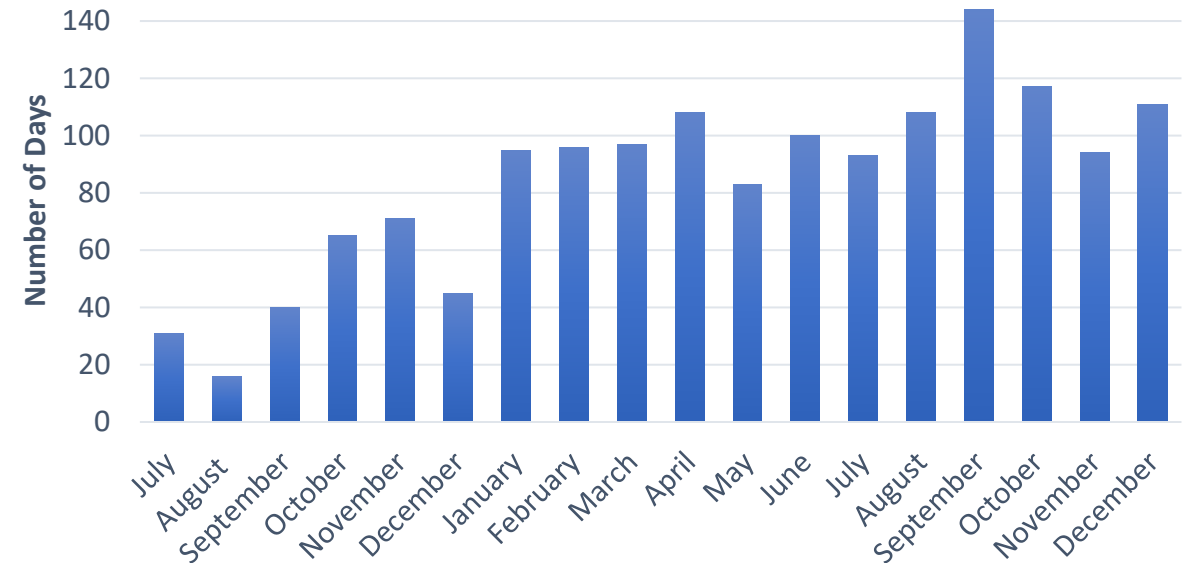


Larned State Hospital

SSP Average Length of Time on Wait List to Admission (Male)
July 2020 - December 2021

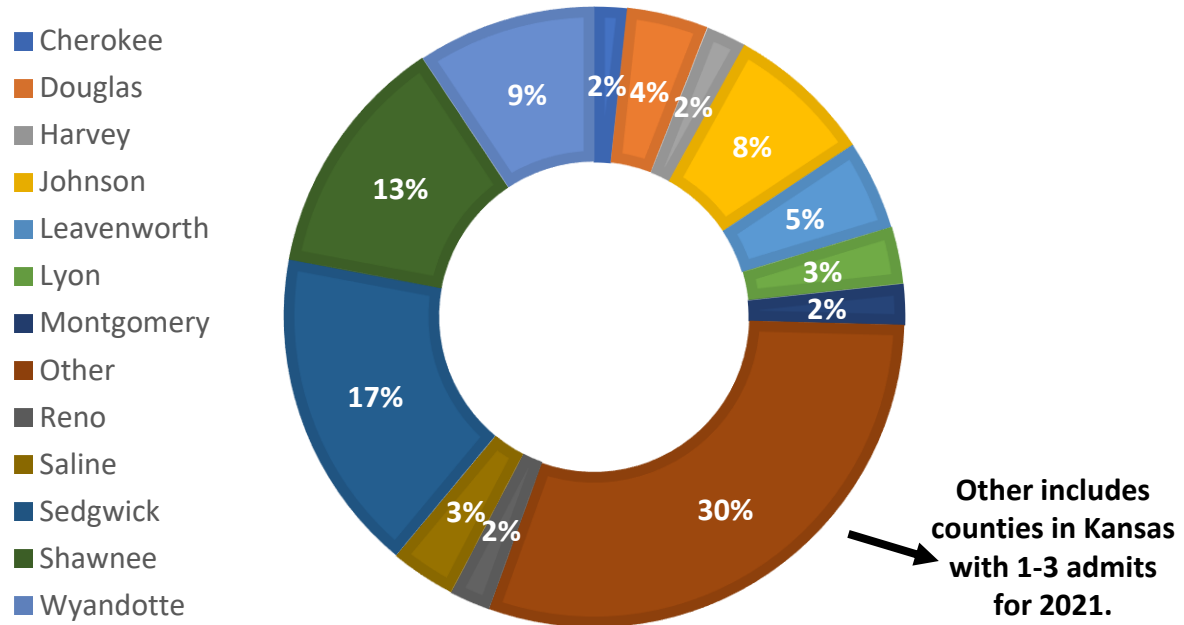


SSP Average Length of Time on Wait List to Admission (Female)
July 2020 - December 2021



Larned State Hospital

SSP ADMISSIONS BY COUNTY
JAN - DEC, 2021



Admissions Jan-Dec, 2021	
Cherokee	4
Douglas	10
Harvey	5
Johnson	18
Leavenworth	11
Lyon	7
Montgomery	5
Other	71
Reno	5
Saline	8
Sedgwick	40
Shawnee	30
Wyandotte	22

Larned State Hospital

Sexual Predator Treatment Program (SPTP):

- Established by a 1994 statute that provides for the civil commitment of persons identified by law as sexually violent predators. SPTP has a dual mission:
 - Provide for the safety of Kansas citizens by establishing a secure environment in which persons identified as sexually violent predators can reside.
 - Offer treatment with the aim of reducing risk for re-offending, allowing motivated persons who complete treatment to return to society.
- LSH provides Clinical oversight for the SPTP program for the State of Kansas. There are currently 247 residents in the inpatient program at LSH. Additionally, 22 residents are housed at three Reintegration Facilities as indicated below, and 17 individuals are in the community on Conditional Release.
 - Meyer East (LSH) 8
 - Maple/Willow (PSH) 8
 - MiCo/Biddle (OSH) 6

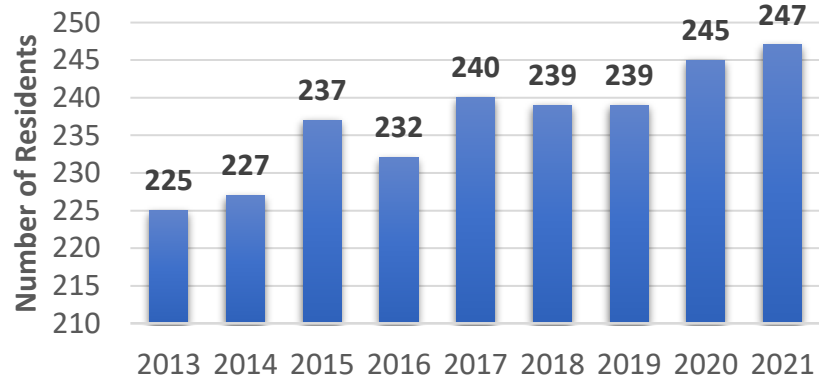
Larned State Hospital

Sexual Predator Treatment Program (SPTP):

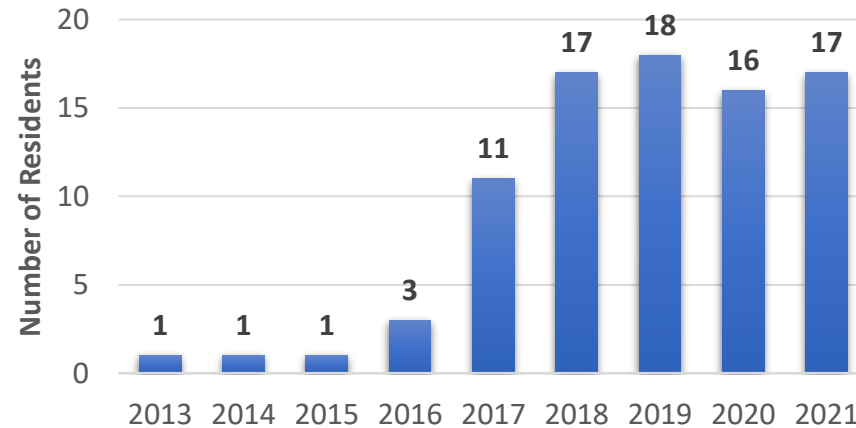
- The program has a current census of 286 residents with 5 remaining rooms for new residents.
- As the court orders individuals to the SPTP, there will be a need to increase capacity at Larned or develop other options to continue to admit new court commitments.
- As individuals advance through the program, there will be a need to increase capacity at Reintegration Facilities. Under current law, Reintegration Facilities may house a maximum of 16 individuals per county.
- LSH requested additional funding in the budget process for staff and capacity at LSH.

Larned State Hospital

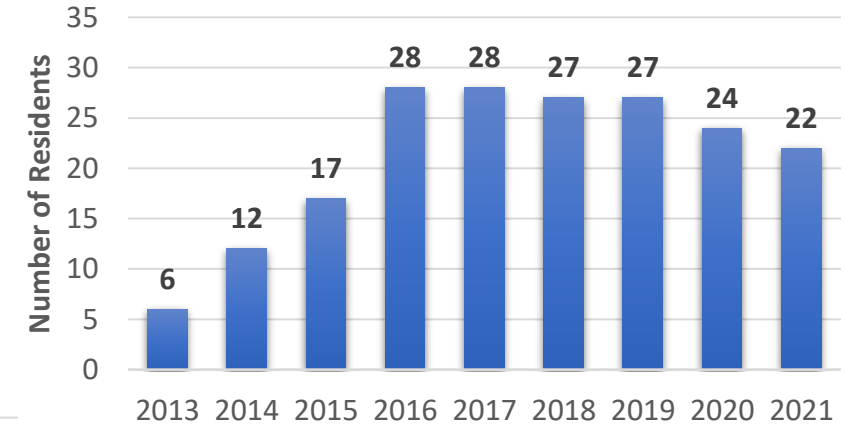
SPTP Inpatient Census



SPTP Conditional Release Census



SPTP Reintegration Census



Recruiting and Retention

- The Governor's 24/7 pay plan increased the base pay for licensed nursing staff and is providing pay differentials for hourly employees and a one-time bonus for salaried employees.
- LSH employees received a pandemic cash award in calendar year 2021.
- Promoting larnedcares.com and the "Be the One" brand in all recruiting endeavors.
- Utilization of Facebook for recruiting and posting of announcements, events, and recognition.
- Participating in virtual and in-person job fairs.
- Online job recruiting along with Kansas State Network (KSN) and Mammoth recruitment initiative (including commercials and digital marketing).
- Utilizing agency RN, LPN, and CNA staff to provide unit coverage.
- Created 50% positions to bring in nursing staff as a recruiting tool to assist with weekend coverage.
- Employing temporary staff to assist with part-time coverage for the nursing department.
- Caring Hands Daycare Center and Route 264 Sunflower Grill available on LSH campus for LSH employees and the local community.

Recruiting and Retention

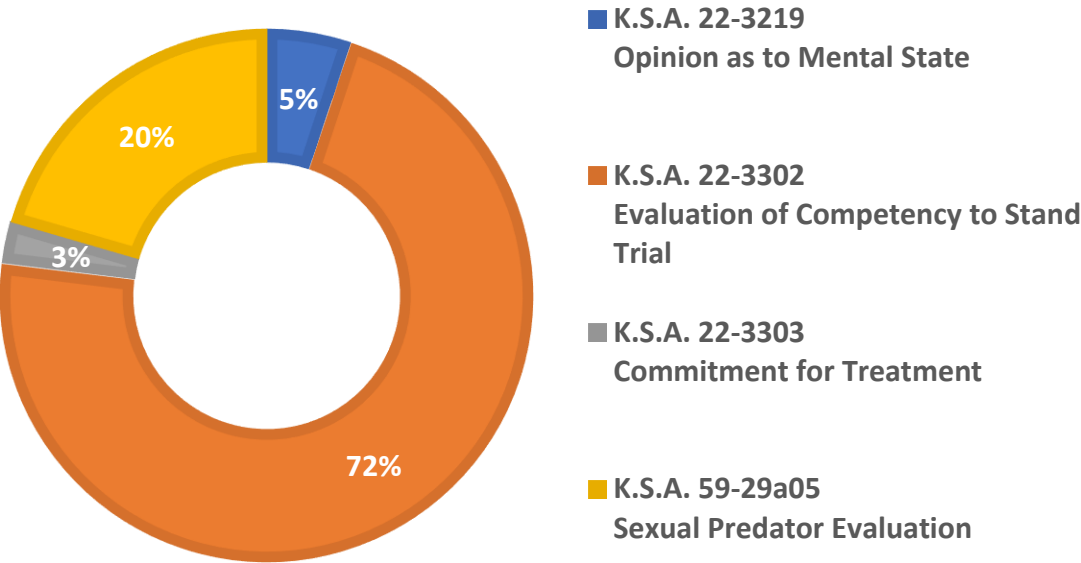
- Participating as an American Psychological Association (APA) approved site; providing internship and postdoctoral training along with practicum site for social and psychology students.
- Employee recognition including the Shooting Star Program, Recognition of Employees of the Quarter and the Year, and celebration of hospital week.
- Annual Mental Health Conference was held in a virtual Zoom setting and offered continuing education units for clinicians.
- Annual Mental Illness Awareness events including the Mayor signing a proclamation for Pawnee County, area poster contest for students, and patient events were held to focus on the importance of mental health services.
- Maintained the LSH Employee Executive Committee, allowing non supervisor staff to share information and participate in hospital initiatives.
- The LSH Endowment committee accepted applications and provided annual \$500 educational scholarships to two selected employees.

SSP Mobile Competency

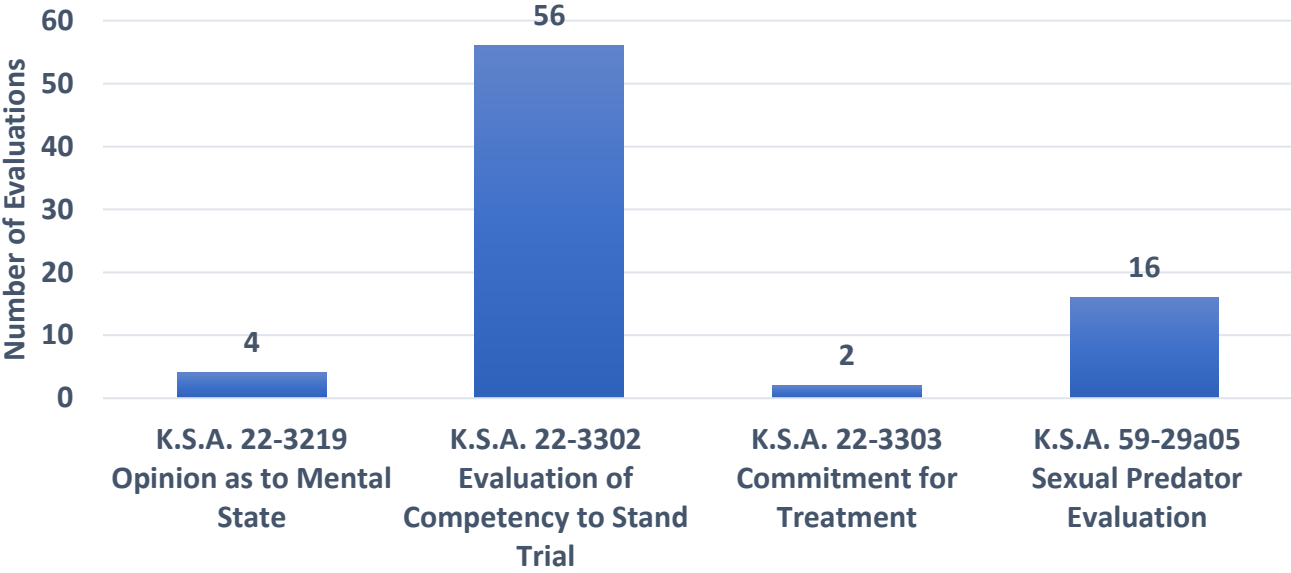
- The State Security Program (SSP) continues to review referrals from the District Courts and considers each case for possible completion through mobile competency in other secured or community settings outside of LSH, partnering with District/County Attorneys, jails and courts. LSH has established a position that is focusing on the SSP wait list in efforts to collaborate with courts and jails and increase mobile competency usage throughout the state.
- SSP continues to provide a monthly report to the Sheriff's Association outlining current status of individuals waiting for placement at the hospital, including the number waiting and length of time on the wait list.
- Partnerships have been established with **21** counties thus far to provide mobile competency evaluations and treatment in the community.
- SSP has worked in partnership with Shawnee County on a pilot project providing competency restoration services in the jail. Similar pilot projects are being developed with Sedgwick and Douglas Counties to provide mobile competency in additional secure locations.

SSP Mobile Competency

TYPES OF MOBILE COMPETENCY EVALUATIONS COMPLETED
JAN. 2020 - DEC. 2021

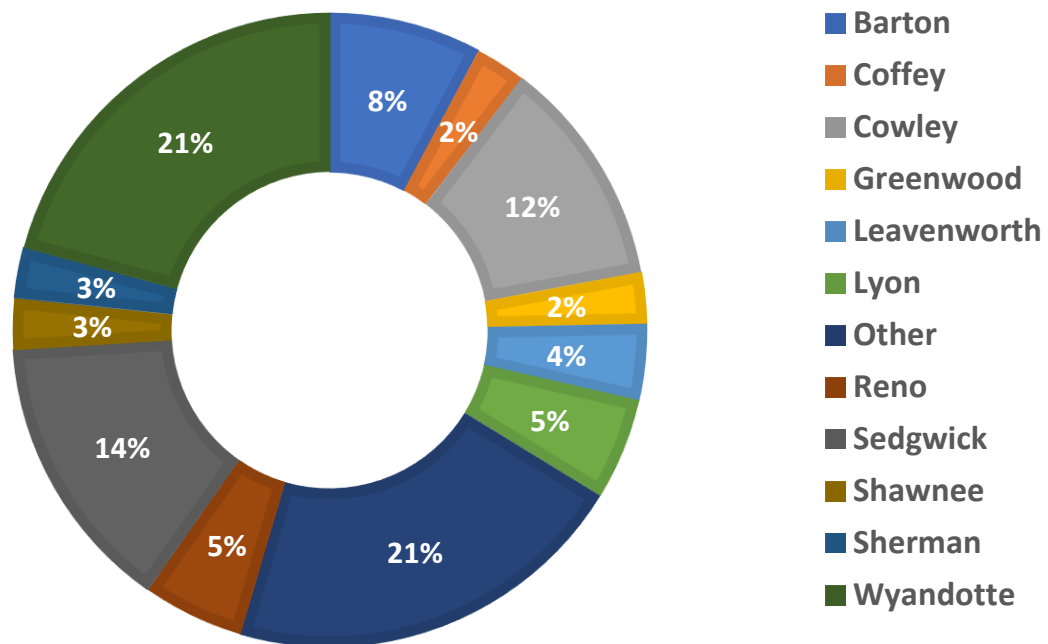


TYPES OF MOBILE COMPETENCY EVALUATIONS COMPLETED
JAN. 2020 - DEC. 2021

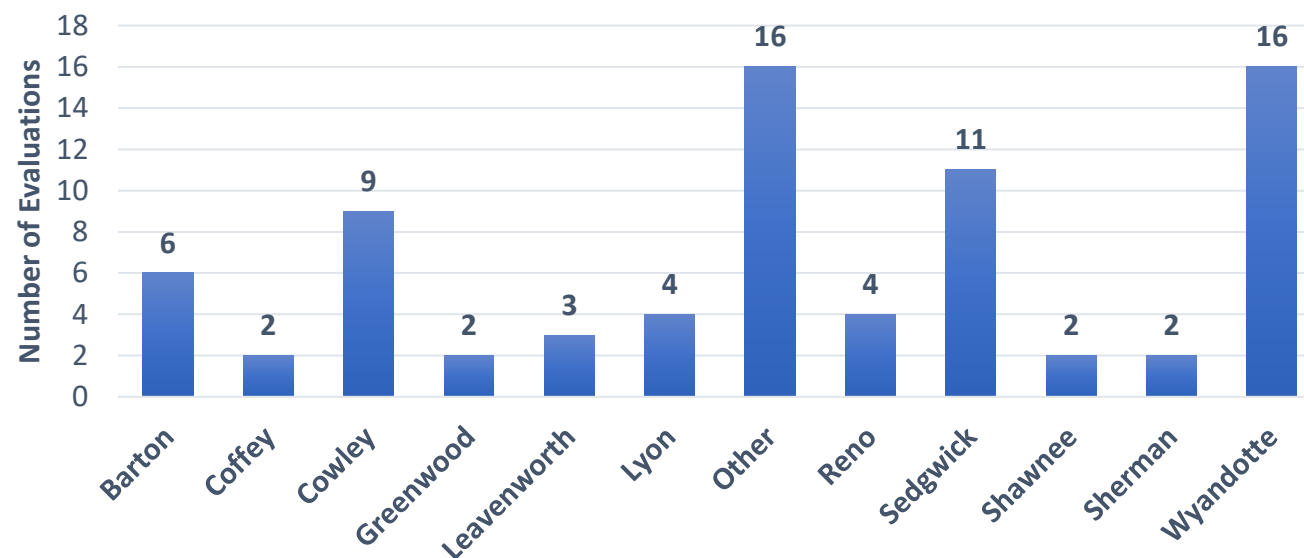


SSP Mobile Competency

COUNTIES MOBILE COMPETENCY EVALUATIONS WERE COMPLETED
JAN. 2020 - DEC. 2021



COUNTIES MOBILE COMPETENCY EVALUATIONS WERE COMPLETED
JAN. 2020 - DEC. 2021



Telemedicine Initiatives

- Evaluated the use of internal and external transports and implemented use of services such as:
 - Using CARES money to purchase telemedicine equipment to establish telemedicine opportunities with providers across the state of Kansas.
 - An additional medical and dental clinic was established for the SPTP population to provide services to residents on the building they reside.
 - Expanding services for physical therapy to residents in their housed location.
 - Utilizing Cologuard to increase options for colon screenings.

Security Enhancements

LSH has pursued enhancing security throughout the campus by:

- Working to create a secure, single point of entry for the PSP program.
- Upgrade to the control panel software for Dillon Building (SPTP program).
- Purchasing mobile, high sensitivity metal and cellphone detectors for the secure buildings.
- Implemented the use of a Radio Frequency Identification (RFID) system for all individuals entering or exiting any secure buildings on campus.
- Evaluating current placement and need for additional cameras across the campus.
- Requiring Safety and Security Officers for off campus SPTP transports within the resources that are available.

Significant Changes in the Approved Budget

Larned State Hospital FY 2022

- LSH is relying heavily on contract nursing staff to fill the void in staffing. Contract nurses are receiving COVID pay throughout the pandemic. The rates for contract staff have increased significantly as a result of the ongoing pandemic. LSH is paying approximately 5 times the rate for a contract staff compared to full time staff. LSH is tracking the spending trend and anticipates a Governor's Budget Amendment request for contract staffing costs.
- Hiring employees has proved very difficult in western Kansas. In Larned and surrounding areas, it appears there may be more job opportunities than viable candidates.
- LSH continues to heavily recruit to fill vacant positions. LSH has been unable to compete with the contract rates resulting in a continued decline in our ability to recruit and retain staff. This leads to an increased demand on the FTE staff as they are mandated to carry over shifts, significantly increasing overtime hours and hindering healthy work-life balance.

Significant Changes in the Approved Budget

Larned State Hospital FY 2022

- The 24/7 pay plan which included a base pay increase for licensed nursing staff and hourly differentials for all non-exempt staff and one time bonus for exempt staff will be funded with American Rescue Plan Act (ARPA).
- LSH used CARES funds for COVID related expenses (e.g., PPE, medical equipment, increased staff expenses).
- The aging population of SPTP has resulted in a decline in physical health and an increased need for outside medical hospitalizations. This has increased expenses for outside medical providers and travel costs for sitting hospital staff.
- SPTP continues to expand and is projected outgrow the available bed space requiring opening an additional unit at LSH or identifying other capacity management options in 2022.

Enhancements in the Governor's Budget

Food Service Contract: In FY 2022 the Governor recommended a supplemental of \$893,000 from the State General Fund for amendments made to the food service contract. This supplemental continues into FY 2023 as an enhancement. The food services contract was amended to reflect a lower volume of meals due to not serving the Larned Correctional Facility and higher labors costs due to removing inmate labor. This increased the meal rate by 62.0 percent beginning July 1, 2020.

Direct Care Salary Increase: For FY 2023, the Governor recommended an enhancement of \$349,922 from the State General Fund for salary increases for direct care staff related to Executive Directive 21-537 and 21-538 which were approved and self-funded in FY 2022.

Enhancements in the Governor's Budget

SPTP Security Enhancement: The Governor recommends \$1,150,000 from the State General Fund for security enhancements to the Sexual Predator Treatment Program. This enhancement includes \$600,000 to replace the campus phone system and \$550,000 for 9.00 FTE Safety and Security Officer positions.

State Security Program Upgrades: The Governor recommended \$192,954 including \$112,028 from the State General Fund for State Security Program upgrades and staffing. This would include \$80,926 from the State Institutions Building Fund for purchase of ligature resistant furniture and \$112,028 from the State General Fund for 2.00 FTE Safety and Security Officer positions.

COVID-19 Summary

LSH COVID-19 Cases (Staff) as of 2/1/2022	
Total Number of Tests Conducted	1661
LSH Campus Staff Active Cases	35
LSH Campus Staff Recovered Cases	321
LSH Campus Staff Death	4
Total Positive Cases at LSH Campus Since the Pandemic Began	360

LSH COVID-19 Cases (Patients/Residents) as of 2/1/2022	
Total Number of Tests Conducted	1946
Active Cases	23
Recovered Cases	261
Patient/Resident Death	1
Total Positive Cases at LSH Since the Pandemic Began	285

Osawatomie State Hospital

**Laura Howard Secretary,
Kansas Department for Aging and Disability Services**

House Social Services Budget Committee

Osawatomie State Hospital

February 9, 2022

Dr. Mike Dixon, Acting Superintendent

Osawatomie State Hospital

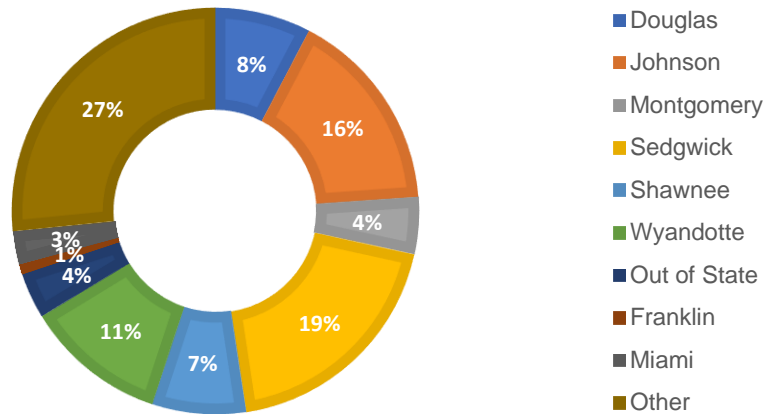
- OSH has served the State of Kansas for more than 154 years.
- OSH serves civilly, criminally and dually committed adults with mental illness.
- OSH serves adults from 45 counties in Kansas and other states.
- 60% of patients served by OSH and 81% of patients served by Adair Acute Care (AAC) present with co-occurring substance use issues.

Osawatomie State Hospital

- Patients are admitted once screened by qualified mental health professionals from one of the Community Mental Health Centers or are referred for evaluation by a court.
- OSH: 114 licensed beds
 - Acute/intensive inpatient psychiatric treatment
 - Criminal court commitment
 - Dual commitment
- AAC: 60 certified/licensed beds
 - Only acute/intensive inpatient psychiatric treatment
- All the rooms on AAC are semi-private rooms and if a patient, due to medical necessity requires a private room, this impacts the number of beds available.

Osawatomie State Hospital

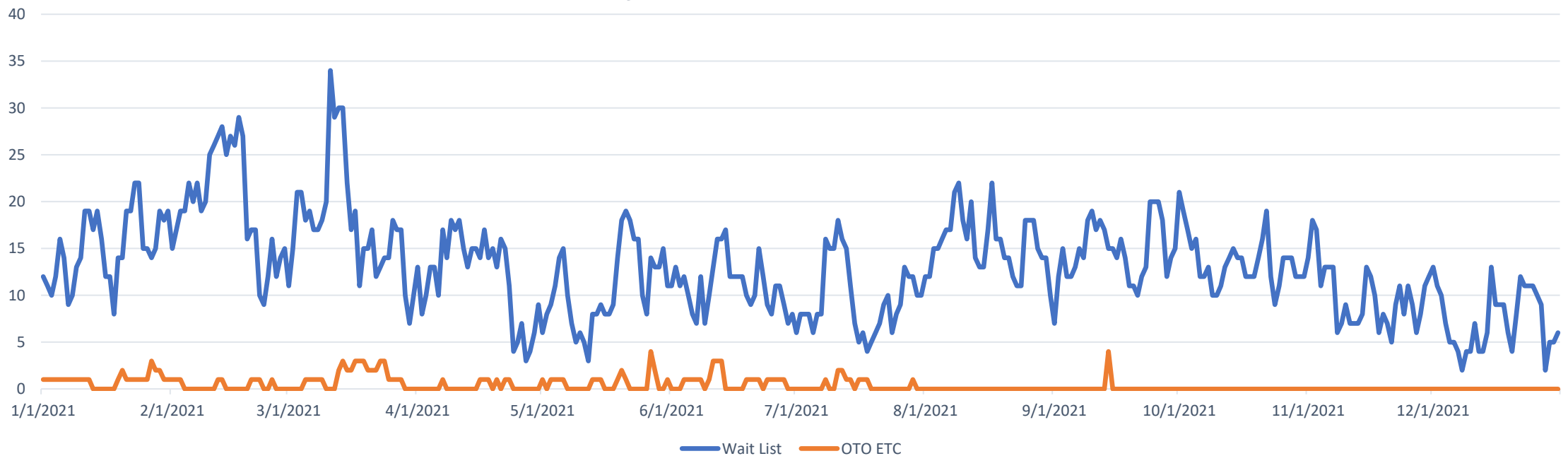
ADMISSIONS BY COUNTY FY2021



FY2021	# of Admits	Other Counties FY2021			
Other Counties		# of Admits		# of Admits	
Sedgwick	215	Allen	16	Jefferson	7
Johnson	182	Anderson	7	Jewell	1
Wyandotte	126	Atchison	4	Labette	9
Douglas	86	Bourbon	9	Leavenworth	27
Shawnee	84	Brown	9	Linn	3
Montgomery	51	Chase	1	Lyon	40
Out of State	42	Chautauqua	4	Marion	2
Miami	29	Cherokee	4	Marshall	2
Franklin	9	Clay	6	Morris	3
		Cloud	3	Nemaha	5
		Coffey	9	Neosho	14
		Crawford	10	Osage	6
		Doniphan	1	Pawnee	1
		Elk	3	Pottawatomie	6
		Geary	27	Riley	45
		Greenwood	7	Washington	1
		Jackson	1	Wilson	5
				Total:	298

OSH Moratorium Waiting List

Moratorium Waiting List
January 1st, 2021 - December 31st, 2021

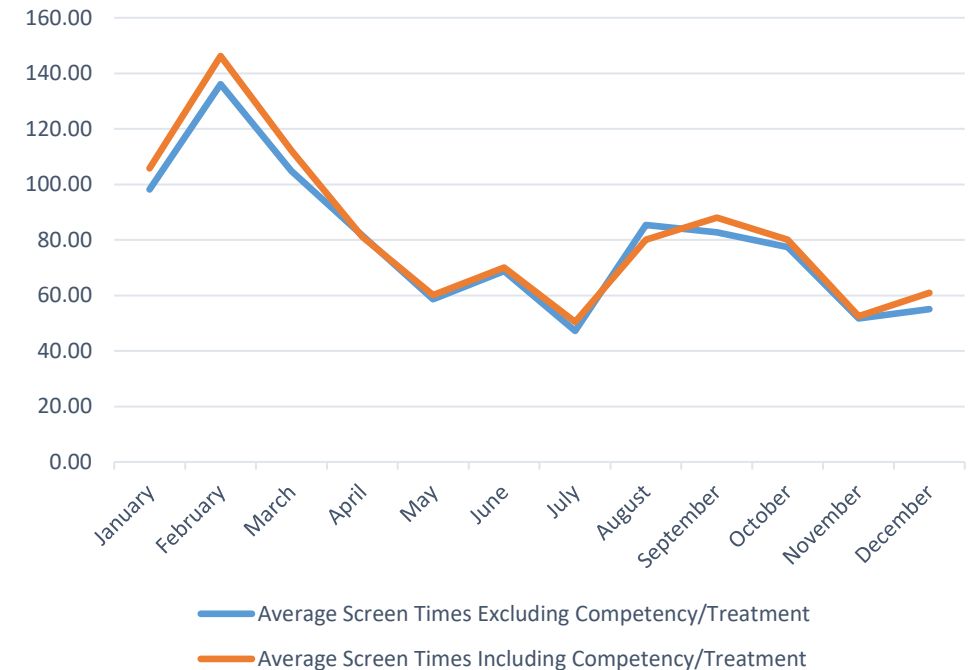


OSH Average Wait Times in Hours per Month

Average Critical Patient Admission Times in Hours

	# of Cases (Admitted)	Combined INCLUDING Comp and Treatment orders
January	81	105.76
February	76	146.22
March	105	112.20
April	95	81.15
May	112	60.16
June	103	70.11
July	83	50.45
August	85	80.07
September	90	88.02
October	90	80.09
November	77	52.52
December	84	60.93
YTD Average	90	82.31
Total Cases:	469	

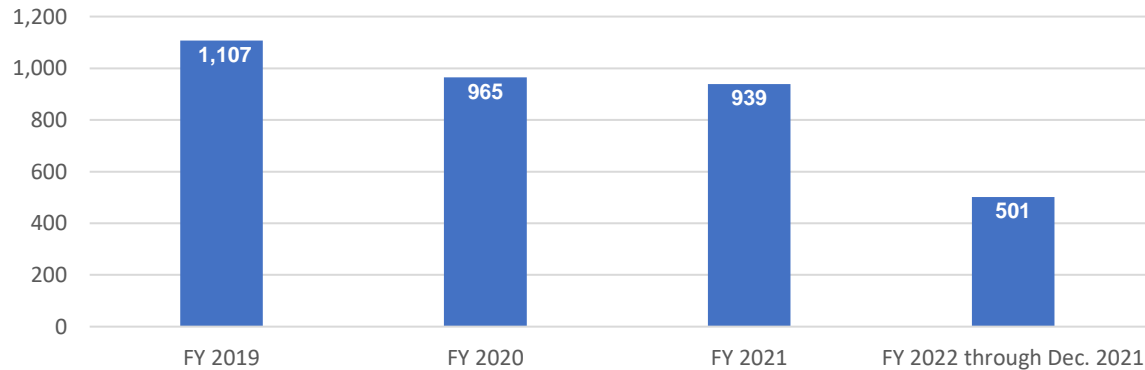
**Average Wait Times in Hours per Month
January 1st, 2021 - December 31st, 2021**



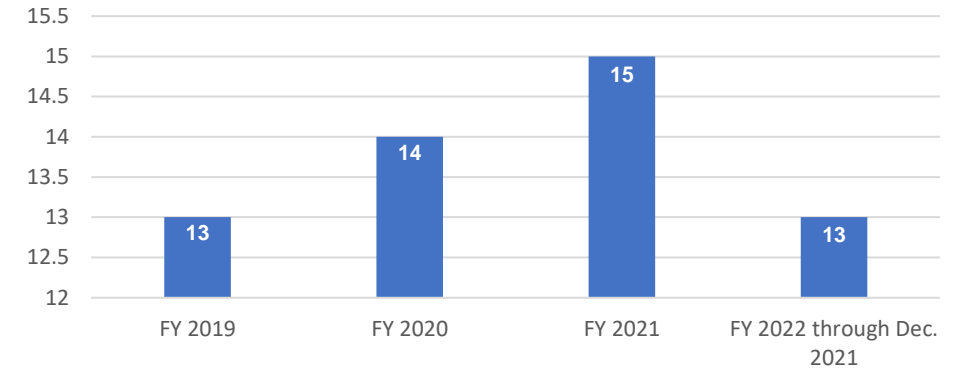
Osawatomie State Hospital

AAC Patient Days and Census				
	FY 2019	FY 2020	FY 2021	FY 2022 through Dec. 2021
PT days	15,628	13,638	13,772	6,664
Ave census	43	38	37	32

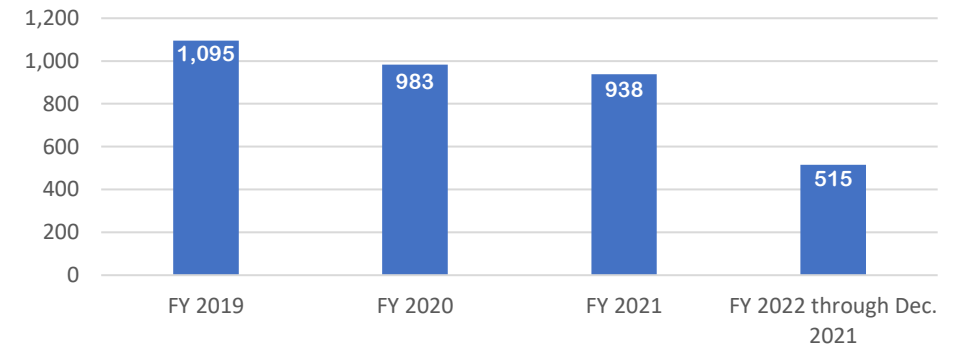
Admissions



Average Length of Stay (ALOS)



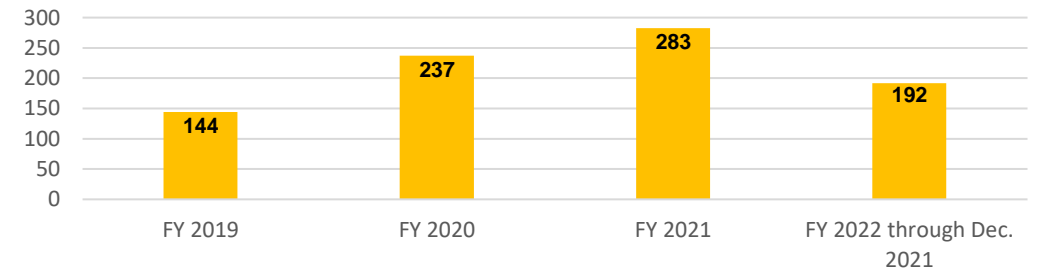
Discharges



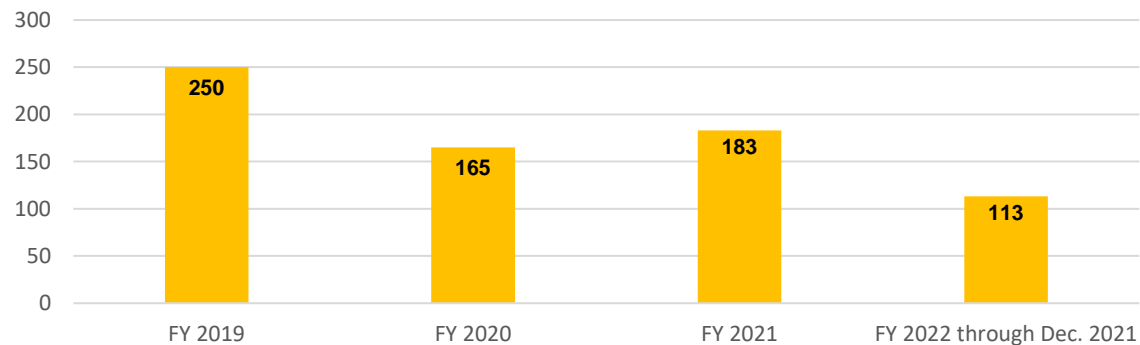
Osawatomie State Hospital

OSH Patient Days and Census				
	FY 2019	FY 2020	FY 2021	FY 2022 through Dec. 2021
PT days	38,947	38,462	35,635	21,616
Ave census	106	106	98	104

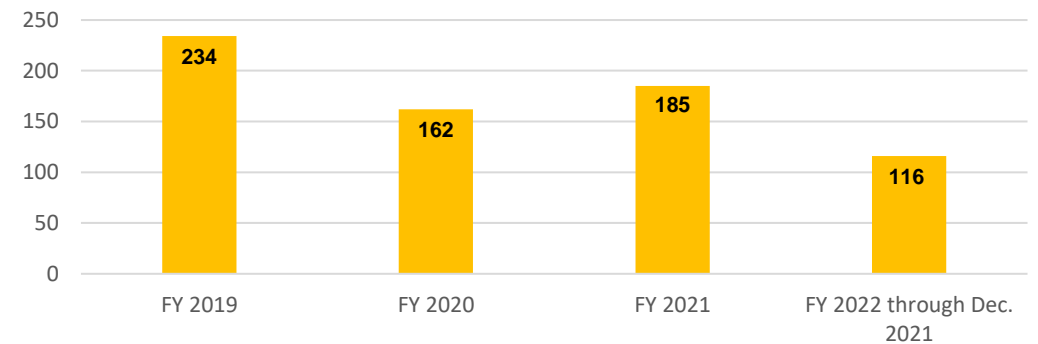
Average Length of Stay (ALOS)



Admissions

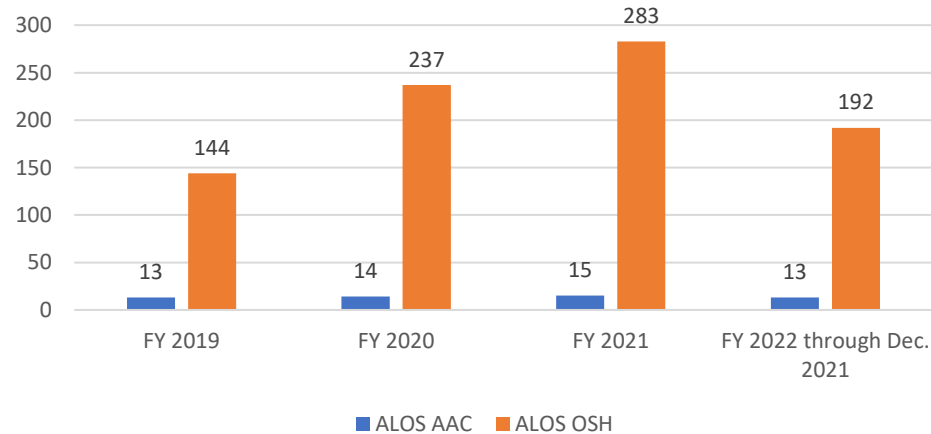


Discharges

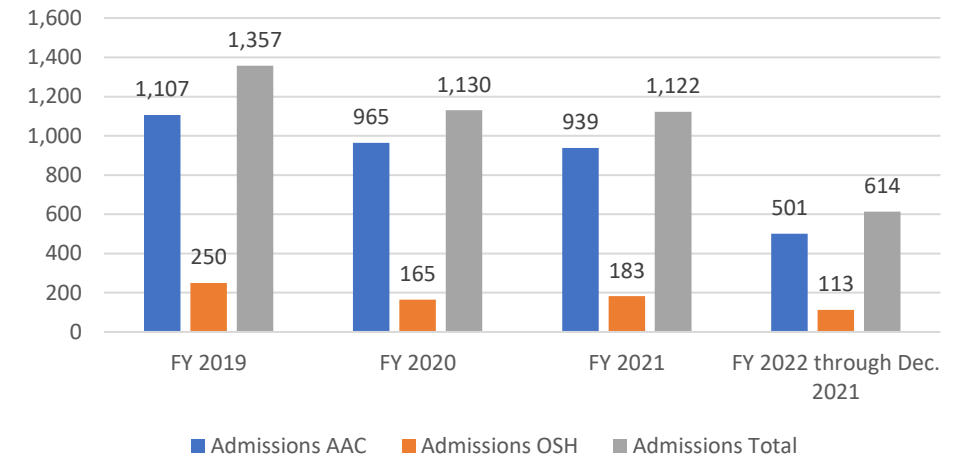


Osawatomie State Hospital

AAC & OSH Average Length of Stay (ALOS)



AAC & OSH Combined Admissions



Average wait times in hours

FY 2018	FY 2019	FY 2020	FY 2021	FY 2022 through Dec. 2021
40.68	47.7	93.64	99.91	65.08

Average # of people on the waiting list per day

FY 2018	FY 2019	FY 2020	FY 2021	FY 2022 through Dec. 2021
7	9.2	8.1	13.6	11.5

Agency Initiatives

Wildly Important Goals (WIGs) -- Work groups established to quickly resolve identified issues.

WIGS Established:

- **Pyxis:** Coordinates and implements the logistical measures necessary to prepare for the arrival and operation of the Pyxis medication dispensing devices.
- **Recruitment and Retention:** Improves staffing levels by increased recruitment and retention. This WIG is broken down into the key areas; advertising, education, incentives, recruitment of doctors, coordination of interns/teaching, and staff recognition and appreciation.
- **Crisis Prevention Initiatives (CPI) Advanced Holds:** Coordinates the training required to certify staff in CPI Advanced Holds, with the intention of providing this training to all new and current staff.
- **Safety:** Improves staff and patient safety on campus through patient engagement, streamlining paperwork and documentation, establishment of a rapid response team (for urgent medical or safety events), and the improvement of communication of safety measures through training.

Agency Initiatives

Recruitment and Retention Subcommittees established to address all opportunities for improvement

- **Advertising:** Utilization of both internal and external resources to promote career opportunities at the agency
- **Doctor Recruitment:** Utilization of head hunting firm to fill existing vacancies, as well as, review of contracts to encourage retainment of current staff
- **Education and Internships:** Establish clear guidance for interns to create a positive experience that could lead to future full time recruitment, as well as, identify what education opportunities should be offered to recruit and retain staff
- **Employee Appreciation, Recognition, and Incentives :** Identify both tangible and intangible ways to show staff how much they are valued
- **Safety:** Provide updates to committee as to the progress in promoting safety across the agency, specifically as it applies to staff

Lifting the Moratorium

- On January 3rd, 2022, the State Hospital's Moratorium, which had been in effect since 2015, was lifted to allow voluntary admissions to be admitted to Osawatomie State Hospital and Adair Acute Care.
- Upon lifting the Moratorium this included adding Social Detox Program.
- The social detox program at Adair Acute Care at Osawatomie State Hospital will have three beds available for patients brought to the hospital by their local law enforcement as they have been found to be a person who is, or may be, a person with an alcohol or substance abuse problem subject to involuntary commitment for care and treatment as they are likely to cause harm to self or others if not immediately detained.

Implementing Census Management

How to avoid filling the hospital above capacity and risk losing certification?

Census Management

- All patients must be screened through the Community Mental Health Centers to verify clinical need.
- Admit patients involuntarily committed by the Courts and voluntary patients that seek care that meet clinical criteria.
- Authorize admissions up to a capacity threshold for both voluntary and involuntary patients. When occupancy reaches 85% of capacity, involuntary admissions are prioritized.
- As of February 7, no patients meeting voluntary criteria have been admitted.

Social Detox Program

- Assess each patient's psychological, medical, and substance abuse needs.
- Each patient is scheduled for an assessment with the Regional Drug and Alcohol Assessment Center (RADAC) and if needed, a mental health screening can be requested.
- Individual education and coaching are provided by members of the treatment team.
- Develop individualized discharge plans based on recommendations from the responsible county court, RADAC, AAC Interdisciplinary Team and any other outside agencies.

Biddle Remodel

B2 Remodel:

- Demolition is complete and construction is nearly finished.
- Expected date to occupy renovated space is March 1, 2022.
- Completion date was pushed back due to back order of patient room doors.
- Adds 14 patient rooms to allow patient moves to accommodate additional renovations

East Biddle Remodel:

- Schematic design drawings are 95% complete.
- Design and plans are being updated based on recommendations from certification consultant
- Construction is scheduled to begin in January 2022.
- Projected date to occupy renovated space is September 2023.

COVID-19 Summary

OSH COVID-19 Cases (Staff) as of 2/1/2021	
Total Number of Tests Conducted	4,345
OSH Staff Active Cases	28
OSH Staff Recovered Cases	234
OSH Staff Death	1
Sodexo Active Cases	0
Sodexo Recovered Cases	0
Total Positive Cases at OSH Since the Pandemic Began	263

OSH COVID-19 Cases (Patients/Residents) as of 2/1/2021	
Total Number of Tests Conducted	2,286
Active Cases	26
Recovered Cases	98
Patient/Resident Death	4
Total Positive Cases at OSH Since the Pandemic Began	128

COVID-19

Sustaining OSH/AAC through the COVID-19 Pandemic:

- Continued a COVID-19 Taskforce to lead infection control projects, policies and other related tasks.
- A comprehensive COVID-19 policy with on-going updated information per CDC guidance.
- Utilization of a functioning COVID-19 unit. The unit is equipped with the necessary negative airflow fans and air scrubbers.
- Researched and provided on-going education to staff about the virus, safety practices, needed PPE, quarantine procedures through multiple communication avenues.
- Continued use of efficient employee screening stations that proved to decrease the spread of COVID-19 to our patients and co-workers.
- 24-hour infection control hotline to employees that have questions about their symptoms or exposure risks.
- OSH/AAC employees have received one round of hazard pay in FY 2022.
- 687 vaccines have been administered to hospital staff since the beginning of the pandemic.
- 247 vaccines have been administered to patients since the beginning of the pandemic.

Significant Changes in the Approved Budget

Osawatomie State Hospital FY 2022

- Agency staffing costs increased \$2.3 Million from FY 2021.
- Meritorious Service Awards totaling \$401,000 given to staff in October 2021 for the work done to provide patient care during the COVID pandemic.
- Received \$42,613 from the American Rescue Plan (ARP), used to offset some of the cost of the October 2021 Meritorious Services Award.
- Request for Proposal (RFP) for patient tray delivery system to provide a more palatable meal experience for patients and to address the need for a separate, certified dining space in the upcoming remodeled Biddle unit.
- Painting, floor repair, and updating of furniture planned for patient units not included in the planned B2 and Biddle remodel.

Enhancements in the Governor's Budget

Direct Care Salary Increase: For FY 2023, the Governor recommended an enhancement of \$1.1 million from the State General Fund for salary increases for direct care staff related to Executive Directive 21-537 and 21-538 which were approved and self-funded in FY 2022.

Moratorium Staffing: The Governor recommended an enhancement of \$1.4 million for an additional 36.00 FTE positions to staff the renovated units in the Biddle Building and maintain the continuum of care needed for voluntary and involuntary admissions.

- 2 Activity Specialist positions
- Director of Nutrition Services position
- 2 General Maintenance Technician positions
- Purchasing Department Director position
- Utilization Review Nurse position

Enhancements in the Governor's Budget

Social Detox Unit: The Governor recommended \$993,018 from the State General Fund for 5.00 FTE positions for the Social Detox Program. The interdisciplinary treatment team required for this program would include

- Psychiatrist
- Medical Physician
- Licensed Clinical Addiction Counselor
- Registered Nurse
- Licensed Social Worker

Appendix

Performance Based Budgeting Data

Performance Based Budgeting -- LSH

Administrative Program

Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percent of Risk Management incidents that are logged and prepared for initial review within 24 hours of receipt by Risk Manager	100%	100%	100%	100%	100%

Staff Education and Research Program

Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percent of employees completing Crisis Intervention Institute (CPI) re-certification to maintain competency per regulatory expectations.	99%	99%	97%	99%	99%

Ancillary Program

Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Medical – Admission Intake Assessment (AIA) and Columbia Suicide Severity Rating Scale completed timely (all 3 programs).	90%	91%	93%	92%	90%
Nursing – Admission Intake Assessment (AIA) completed timely (all 3 programs).	94%	96%	95%	96%	90%

Performance Based Budgeting -- LSH

Psychiatric Services Program

Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percent of completed admission intake assessment by medical within 24 hours of admission.	93%	95%	95%	96%	95%
Percent of completed social work patient discharge instructions prior to discharge.	100%	100%	87%	100%	100%

State Security Program

Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percent of completed psychosocial assessments within policy timeframes.	98%	95%	99%	100%	95%
Percent of completed social work patient discharge instructions prior to discharge.	100%	100%	100%	100%	90%

Performance Based Budgeting -- LSH

Sexual Predator Treatment Program

Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percent of scheduled treatment groups held.	57%	92%	79%	74%	94%
Reintegration: Resident progress will be monitored and reviewed every quarter.	100%	100%	100%	100%	100%

Physical Plant-Central Services

Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percent of tray audits meeting proper food temperatures.	58%	79%	89%	97%	95%
Percentage of fire drills completed that are required by the Kansas State Fire Marshall (KSFM).	100%	100%	100%	100%	100%

Performance Based Budgeting -- OSH

Performance Measures

Percent of patients who have: a history and physical completed within 24 hours of admission, examination signed and dated, all sections of the history and physical examination completed including review of Cranial Nerves II - XII and Impressions/Recommendations, reason documented if Rectal/Pelvic examination is deferred.

AAC Medical Program				
FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
99%	100%	99%	96%	100%

OSH Medical Program				
FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
99%	94%	97%	91.8%	98%

Performance Based Budgeting -- OSH

AAC Clinical Program					
Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Healthcare associated infections will rate remains below national average of 4.0 percent.	<4%	1%	2%	.8%	2%
Percent of staff in compliance with the 5 moments of handwashing.	90%	91%	93%	95%	95%

OSH Clinical Program					
Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Healthcare associated infections will rate remains below national average of 4.0 percent.	1.4%	.9%	1.1%	.9%	.9%
Percent of staff in compliance with the 5 moments of handwashing.	90%	55%	97%	92%	98%

Performance Based Budgeting -- OSH

AAC Clinical Program					
Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percentage of patients readmitted within 30 days of discharge	8%	9%	8%	6%	7%

OSH Clinical Program					
Performance Measures	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Actuals	FY 2022 Actuals through Dec. 2021	FY 2023 Estimate
Percentage of patients readmitted within 30 days of discharge	6%	2.6%	1%	5.4%	1%